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Non ** CONTINUING DATA *****

Non ** FOREIGN APPLICATIONS *****

IF REQUIRED, FOREIGN FILING LICENSE GRANTED
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Foreign Priority claimed 35 USC 119 (a-d) conditions met Verified and Acknowledged	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance Examiner's Signature _____ Initials <i>RU</i>	STATE OR COUNTRY FINLAND	SHEETS DRAWING 12	TOTAL CLAIMS 37	INDEPENDENT CLAIMS 6
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ADDRESS
 27123
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 NEW YORK, NY
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TITLE
 Method and system for providing communications security

FILING FEE RECEIVED 1334	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue)
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